	PATENT APPLICATION - ÉE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number			
	CLAIMS AS FILED - PART I							SMALL	ENTITY	1.07	OTH.	ER THAN	
-	S NATION	AL CTAOE SEE		olumn 1)		(Column 2)		TYPE		(L ENTITY	
一		AL STAGE FEE	S					RATE	FE	E	RATE	FE	
BA	ASIC FEE		SMALL	ENT. = \$ 150	LA	RGE ENT. = \$ 300		BASIC FEE		-	R BASIC FEE	- A-	
EX	AMINATION	FEE	Satisfies P((4) =	Satisfies PCT Article 33(1)- (4) = \$50/\$100		other situations = \$ 100 / \$ 200	1	EXAM. FEE		- `			
SE	ARCH FEE		U.S. is ISA ALL othe	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		other situations = \$ 250 / \$ 500		SEARCH FE	E	<u> </u>	EXAM. FEE SEARCH FE	2	
FE.	E FO R EXTR	A SPEC. PGS.		minus 100 =		/50 =	1	X \$ 125				1901	
О	TAL CHARGE	EABLE CLAIMS	20) minus 20 = .						_	X \$ 250		
ND	EPENDENT	CLAIMS	0	2 minus $3 = 1$			1	X \$ 25 =		01	X \$ 50 =		
AU!	TIPLE DEPE	ENDENT CLAIM P	RESENT	,				X \$ 100 =	-	OF	X \$ 200 =	=	
				222 224 808	 _			+ \$ 180 =		OF	+ \$ 360 =		
	If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OF	TOTAL	9/11	
		(Column 1)	AMENDE	(Columi	n 2)	(Column 3)		SMALL	ENTITY	OR		, R THAN ENTITY	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	*	Minus	44		=	f	X \$ 25 =	1	OR	V 6 50	FEE	
	Independent	*	Minus	***		=	ŀ	X \$ 100 =		-			
	FIRST PRESENTATION OF MULTIPLE DEPE			PENDENT CL	AIM		-			OR	X \$ 200 =		
							Ļ	+ \$ 180 =		OR	+ \$ 360 =		
	•						•	FEE		OR	TOTAL ADDIT. FEE		
_		(Column 1)		(Column	2)	(Column 3)			-				
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA	. ,	RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL	
F	otal	*	Minus	**		=		X \$ 25 =		OR	V # 50 -	FEE	
la	dependent	*	Minus	***	-	=	-	< \$ 100 =		-	X \$ 50 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	X \$ 200 =		
	TOTAL ADD									OR OR	+ \$ 360 = TOTAL ADDIT.		
N () N ()	e entry in colur	nn 1 is less than the o	entry in column 2	. write "0" in colu	umn 3,			FEE L		w 1 1	FEE [
	,	nber Previously Paid nber Previously Paid ber Previously Paid F	FACIAL LUIC CO				пе ар	propriate box i	oluma 1_				

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